

B1 (Official Form 1) (04/13)

United States Bankruptcy Court WESTERN DISTRICT OF MISSOURI KANSAS CITY DIVISION		Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Holt, Robert Edward		Name of Joint Debtor (Spouse) (Last, First, Middle): Holt, Debbie Ann	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): fka Debbie Ann Oberman	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-4257		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-0524	
Street Address of Debtor (No. and Street, City, and State): 9016 E 74th Terrace Raytown, MO		Street Address of Joint Debtor (No. and Street, City, and State): 9016 E 74th Terrace Raytown, MO	
ZIP CODE 64133		ZIP CODE 64133	
County of Residence or of the Principal Place of Business: Jackson		County of Residence or of the Principal Place of Business: Jackson	
Mailing Address of Debtor (if different from street address): 9016 E 74th Terrace Raytown, MO		Mailing Address of Joint Debtor (if different from street address): 9016 E 74th Terrace Raytown, MO	
ZIP CODE 64133		ZIP CODE 64133	
Location of Principal Assets of Business Debtor (if different from street address above):			
ZIP CODE			
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:		Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under title 26 of the United States Code (the Internal Revenue Code).	
Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13		Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.	
Filing Fee (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: Chapter 11 Debtors <input type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).	
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.			THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000			
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion			
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion			

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): Robert Edward Holt Debbie Ann Holt	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed: None	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor: None	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). <div style="display: flex; justify-content: space-between;"> X <u>/s/ Rachel Lynn Foley</u> Rachel Lynn Foley <u>9/8/2013</u> Date </div>	
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D, completed and signed by the debtor, is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) <div style="text-align: right; margin-right: 100px;"> _____ (Name of landlord that obtained judgment) </div> <div style="text-align: right; margin-right: 100px; margin-top: 20px;"> _____ (Address of landlord) </div>			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition*(This page must be completed and filed in every case)*Name of Debtor(s): **Robert Edward Holt**
Debbie Ann Holt**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Robert Edward Holt
Robert Edward Holt**X** /s/ Debbie Ann Holt
Debbie Ann Holt

Telephone Number (If not represented by attorney)

9/8/2013

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.**X** _____

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)_____
Date**Signature of Attorney*****X** /s/ Rachel Lynn Foley
Rachel Lynn FoleyBar No. **47121****Foley Law**
4016 S. Lynn Court Drive
Ste. B
Independence, MO 64055Phone No. **(816) 472-4357** Fax No. **(888) 876-1591**9/8/2013

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____

Signature of Authorized Individual

Printed Name of Authorized Individual_____
Title of Authorized Individual_____
Date**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer_____
Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)_____
Address**X** __________
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**In re: **Robert Edward Holt
Debbie Ann Holt**Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
- ☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Robert Edward Holt
Robert Edward Holt

Date: 9/8/2013

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

Debtor(s)

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- ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

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**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**

In re: **Robert Edward Holt
Debbie Ann Holt**

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Debbie Ann Holt
Debbie Ann Holt

Date: 9/8/2013

B6A (Official Form 6A) (12/07)

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE A - REAL PROPERTY

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
<p>9016 E 74th Terrace, Raytown, MO 64133 Lot 23, Block 7, Gregory Heights, a subdivision in Raytown, Jackson County, Missouri.</p> <p>average sales price for similar recently sold homes is \$58,407. 9016 E 74th Ter is in the 64133 ZIP code in Raytown, MO. The average price per square foot for homes for sale in 64133 is \$54</p> <p>Single Family Residential 1,060 sqft Stories: 1 story Subdivision: GREGORY HEIGHTS 2 Bedrooms Lot Size: 8,352 sqft Heating: Central County: Jackson 1 Bathroom Built In 1954 Exterior Walls: Wood Tax Rate Code Area: 022</p>	JTBE	C	\$58,407.00	\$90,397.00

Total: \$58,407.00
(Report also on Summary of Schedules)

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash	-	\$20.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		First Federal Checking Acct. 8434	-	\$6.28
		First Federal Checking Act. 8426	-	\$0.00
		Black & Veatch Credit Union	-	\$5.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video and computer equipment.		Hshgoods Misc Items Sofa, Love Seat. Toshiba Television, Sony Television, Entertainment Center/TV Cabinet, DVD Player, VHS Player, Computer/Printer, End tables, Dining Table/Chairs, China Cabinet, Refrigerator/Freezer, Stove/Range, Microwave, Washing Machine, Clothes Dryer, Dishes/Flatware, Pots/Pans/Cookware, 3 Beds, Dressers/Night Stands, Lamps/Accessories, Cellular Telephones, Lawn Mower, Yard/Landscaping Tools	-	\$1,950.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, Family Pictures, Compact Discs, DVD's, Records, Thomas Kincade	-	\$350.00
6. Wearing apparel.		Clothes 2 Adults	-	\$300.00
7. Furs and jewelry.		Jewelry	-	\$300.00

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
		Misc Items Wedding Ring, Rings, Earrings, Necklaces, Bracelets		
8. Firearms and sports, photographic, and other hobby equipment.		Camera	-	\$50.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term Life	H	\$0.00
		Term Life	W	\$0.00
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		PEERS	H	\$40,000.00
		PSRS/PEERS (as of 6/30/13)	C	\$12,053.90
		Dick's Sporting Goods, Inc. Smart Savings 401(k) Plan loan of \$2,676 on 6/26/13 used for living expenses.	C	\$5,200.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 2

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2006 FORD F150 VIN 1FTPX12526KA82870 84,658 miles fair condition 2006 Ford F150 Pickup-V8 Regular Cab STX 4WD Rough Trade-InAverage Trade-InClean Trade-InClean Retail Base Price\$6,075\$7,300\$8,325\$11,125 Mileage (84,658)\$1,000\$1,000\$1,000\$1,000 Total Base Price\$7,075\$8,300\$9,325\$12,125 Options: (edit options) Aluminum/Alloy WheelsStd.Std.Std. Std. Price with Options\$7,075\$8,300\$9,325\$12,125	C	\$10,000.00
		1999 OLDSMOBILE CUTLASS GLS VIN 1G3NG52M9X6331018	C	\$400.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 4

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
		poor condition		
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		HP Desktop Computer HP Printer Computer Desk/Office	C	\$100.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.		3 Dogs 2 Cats	C	\$0.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		Gift Cards Ihop 20 Olive Garden 25 Carrabas 20 Dress Barn 10	-	\$75.00
		Paypal Accounts	H	\$0.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 5

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
		1996 Coleman Palamino Pop-Up Camper VIN 1PA100H1XT1082084	C	\$500.00
<p style="text-align: right;">5 continuation sheets attached</p> <p>(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)</p>				Total > \$71,310.18

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:
(Check one box)☐ Check if debtor claims a homestead exemption that exceeds
\$155,675.*

- ☐ 11 U.S.C. § 522(b)(2)
- ☒ 11 U.S.C. § 522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
9016 E 74th Terrace, Raytown, MO 64133 Lot 23, Block 7, Gregory Heights, a subdivision in Raytown, Jackson County, Missouri. average sales price for similar recently sold homes is \$58,407. 9016 E 74th Ter is in the 64133 ZIP code in Raytown, MO. The average price per square foot for homes for sale in 64133 is \$54 Single Family Residential 1,060 sqft Stories: 1 story Subdivision: GREGORY HEIGHTS 2 Bedrooms Lot Size: 8,352 sqft Heating: Central County: Jackson 1 Bathroom Built In 1954 Exterior Walls: Wood Tax Rate Code Area: 022	Mo. Rev. Stat. § 513.475: Homestead (consists of house and land used therewith)	\$15,000.00	\$58,407.00
Cash	Mo. Rev. Stat. § 513.430.1(3): Any property of debtor	\$20.00	\$20.00
First Federal Checking Acct. 8434	Mo. Rev. Stat. § 513.430.1(3): Any property of debtor	\$6.28	\$6.28
* Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.		\$15,026.28	\$58,433.28

B6C (Official Form 6C) (4/13) -- Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Continuation Sheet No. 1

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Black & Veatch Credit Union	Mo. Rev. Stat. § 513.430.1(3): Any property of debtor	\$5.00	\$5.00
Hshgoods Misc Items Sofa, Love Seat, Toshiba Television, Sony Television, Entertainment Center/TV Cabinet, DVD Player, VHS Player, Computer/Printer, End tables, Dining Table/Chairs, China Cabinet, Refrigerator/Freezer, Stove/Range, Microwave, Washing Machine, Clothes Dryer, Dishes/Flatware, Pots/Pans/Cookware, 3 Beds, Dressers/Night Stands, Lamps/Accessories, Cellular Telephones, Lawn Mower, Yard/Landscaping Tools	Mo. Rev. Stat. § 513.430.1(1): Personal household furnishings & goods, wearing apparel, books, animals, crops, and musical instruments of debtor and dependents	\$1,950.00	\$1,950.00
Books, Family Pictures, Compact Discs, DVD's, Records, Thomas Kincade	Mo. Rev. Stat. § 513.430.1(1): Personal household furnishings & goods, wearing apparel, books, animals, crops, and musical instruments of debtor and dependents	\$350.00	\$350.00
Clothes 2 Adults	Mo. Rev. Stat. § 513.430.1(1): Personal household furnishings & goods, wearing apparel, books, animals, crops, and musical instruments of debtor and dependents	\$300.00	\$300.00
Jewelry Misc Items Wedding Ring, Rings, Earrings, Necklaces, Bracelets	Mo. Rev. Stat. § 513.430.1(2): Personal, family or household jewelry of debtor or dependents	\$300.00	\$300.00
	Mo. Rev. Stat. § 513.430.1(2): A wedding ring not to exceed \$1,500.00 in value combo with reg jewelry	\$0.00	
Term Life	Mo. Rev. Stat. § 513.430.1(7): Unmatured life insurance contracts,	\$0.00	\$0.00
		\$17,931.28	\$61,338.28

B6C (Official Form 6C) (4/13) -- Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Continuation Sheet No. 2

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Term Life	except credit life		
	Mo. Rev. Stat. § 513.430.1(8): Dividends, interest, or loan values of unmatured life insurance contracts more than 1 year old insuring debtor or person of whom debtor is a dependent	\$0.00	
	Mo. Rev. Stat. § 513.430.1(7): Unmatured life insurance contracts, except credit life	\$0.00	\$0.00
PEERS	Mo. Rev. Stat. § 513.430.1(8): Dividends, interest, or loan values of unmatured life insurance contracts more than 1 year old insuring debtor or person of whom debtor is a dependent	\$0.00	
	Mo. Rev. Stat. § 513.430.1(10)(f): Money or assets payable from, or an interest in, a retirement plan or IRA that is qualified under the I.R.C. (100%, except that fraudulent contributions and contributions made within 3 years of the date of filing are not exempt.)	\$40,000.00	\$40,000.00
	Mo. Rev. Stat. § 513.430.1(10)(e): Payments under a stock-bonus, pension, profit-sharing, nonpublic retirement, annuity, or similar plan or contract, including debtor's rights in deferred compensation programs offered by state or political subdivision thereof. (Amount reasonably necessary to support debtor &	\$0.00	
		\$57,931.28	\$101,338.28

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT***Continuation Sheet No. 3*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
PSRS/PEERS (as of 6/30/13)	dependents (Payments under certain nonqualified plans are not exempt)) Retirement: 11 U.S.C. §541(c)(2) - Patterson v Shumate, 504 U.S. 753 11 U.S.C. § 522(b)(3)(C) Mo. Rev. Stat. § 513.430.1(10)(e) Mo. Rev. Stat. § 513.430.1(10)(f)	\$12,053.90	\$12,053.90
Dick's Sporting Goods, Inc. Smart Savings 401(k) Plan	Mo. Rev. Stat. § 513.430.1(10)(f): Money or assets payable from, or an interest in, a retirement plan or IRA that is qualified under the I.R.C. (100%, except that fraudulent contributions and contributions made within 3 years of the date of filing are not exempt.)	\$5,200.00 100%	\$5,200.00
loan of \$2,676 on 6/26/13 used for living expenses.	Mo. Rev. Stat. § 513.430.1(10)(e): Payments under a stock-bonus, pension, profit-sharing, nonpublic retirement, annuity, or similar plan or contract, including debtor's rights in deferred compensation programs offered by state or political subdivision thereof. (Amount reasonably necessary to support debtor & dependents (Payments under certain nonqualified plans are not exempt))	\$0.00	
2006 FORD F150 VIN 1FTPX12526KA82870 84,658 miles fair condition	Mo. Rev. Stat. § 513.430.1(5): Motor vehicle (one)	\$6,000.00	\$10,000.00
2006 Ford F150 Pickup-V8 Regular Cab STX 4WD Rough			
		\$81,185.18	\$128,592.18

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT***Continuation Sheet No. 4*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Trade-InAverage Trade-InClean Trade-InClean Retail Base Price\$6,075\$7,300\$8,325 \$11,125 Mileage (84,658)\$1,000\$1,000\$1,000 \$1,000 Total Base Price\$7,075\$8,300\$9,325 \$12,125 Options: (edit options) Aluminum/Alloy WheelsStd.Std.Std. Std. Price with Options\$7,075\$8,300 \$9,325\$12,125			
Gift Cards Ihop 20 Olive Garden 25 Carrabas 20 Dress Barn 10	Mo. Rev. Stat. § 513.430.1(3): Any property of debtor	\$75.00	\$75.00
1996 Coleman Palamino Pop-Up Camper VIN 1PA100H1XT1082084	Mo. Rev. Stat. § 513.430.1(3): Any property of debtor	\$500.00	\$500.00
		\$81,760.18	\$129,167.18

Document Page 20 of 96
UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

IN RE: **Robert Edward Holt**
Debbie Ann Holt

CASE NO

CHAPTER **13**

TOTALS BY EXEMPTION LAW

Exemption Law	Husband	Wife	Joint	Community	N/A	Exemption Total	Market Value Total
Mo. Rev. Stat. § 513.430.1(1)	\$0.00	\$0.00	\$0.00	\$0.00	\$2,600.00	\$2,600.00	\$2,600.00
Mo. Rev. Stat. § 513.430.1(10)(e)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,200.00
Mo. Rev. Stat. § 513.430.1(10)(f)	\$40,000.00	\$0.00	\$0.00	\$5,200.00	\$0.00	\$45,200.00	\$45,200.00
Mo. Rev. Stat. § 513.430.1(2)	\$0.00	\$0.00	\$0.00	\$0.00	\$300.00	\$300.00	\$600.00
Mo. Rev. Stat. § 513.430.1(3)	\$0.00	\$0.00	\$0.00	\$500.00	\$106.28	\$606.28	\$606.28
Mo. Rev. Stat. § 513.430.1(5)	\$0.00	\$0.00	\$0.00	\$6,000.00	\$0.00	\$6,000.00	\$10,000.00
Mo. Rev. Stat. § 513.430.1(7)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mo. Rev. Stat. § 513.430.1(8)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mo. Rev. Stat. § 513.475	\$0.00	\$0.00	\$0.00	\$15,000.00	\$0.00	\$15,000.00	\$58,407.00
Retirement	\$0.00	\$0.00	\$0.00	\$12,053.90	\$0.00	\$12,053.90	\$12,053.90

B6D (Official Form 6D) (12/07)

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxxxxxx6438 CONSUMER PORTFOLIO SVC PO BOX 57071 IRVINE, CA 92619	C	DATE INCURRED: 03/02/2013 NATURE OF LIEN: Automobile COLLATERAL: See collateral details below REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT THIS IS AN ACCOUNT IN GOOD STANDING OPEN ACCOUNT AUTO LOAN Collateral Details: 2006 FORD F150 VIN 1FTPX12526KA82870 84,658 miles fair condition 2006 Ford F150 Pickup-V8 Regular Cab STX 4WD Rough Trade-InAverage				\$11,835.00	\$1,835.00
		Trade-InClean Trade-InClean Retail Base Price\$6,075\$7,300 \$8,325\$11,125 Mileage (84,658)\$1,000\$1,000 \$1,000\$1,000 Total Base Price\$7,075\$8,300 \$9,325\$12,125					
		Options: (edit options) Aluminum/Alloy WheelsStd. Std.Std.Std. Price with Options\$7,075 \$8,300\$9,325\$12,125 VALUE: \$10,000.00					
Subtotal (Total of this Page) >						\$11,835.00	\$1,835.00
Total (Use only on last page) >							

3 continuation sheets attached

(Report also on
Summary of
Schedules.)(If applicable,
report also on
Statistical
Summary of
Certain Liabilities
and Related
Data.)

B6D (Official Form 6D) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #:	C	DATE INCURRED: 2013 NATURE OF LIEN: Title Loan COLLATERAL: See collateral details below REMARKS: Collateral Details: 1999 OLDSMOBILE CUTLASS GLS VIN 1G3NG52M9X6331018 poor condition				\$1,320.00	\$920.00
Title Max 9004 E State Route 350 Raytown, MO 64133		VALUE: \$400.00					
ACCT #: xxxxxxxxxxxxxx1386		DATE INCURRED: 07/09/2004 NATURE OF LIEN: Home Equity Line of Credit COLLATERAL: See collateral details below REMARKS: CHARGED OFF ACCOUNT HOME EQUITY BAD DEBT; PLACED FOR COLLECTION; SKIP CHARGE OFF AMOUNT IS 4153 Collateral Details: 9016 E 74th Terrace, Raytown, MO					
WFF CARDS 3201 N 4TH AVE SIOUX FALLS, SD 57104	C	64133 Lot 23, Block 7, Gregory Heights, a subdivision in Raytown, Jackson County, Missouri. average sales price for similar recently sold homes is \$58,407. 9016 E 74th Ter is in the 64133 ZIP code in Raytown, MO. The average price per				\$3,853.00	
		square foot for homes for sale in 64133 is \$54					
		Single Family Residential 1,060 sqft Stories: 1 story Subdivision: GREGORY HEIGHTS 2 Bedrooms					
Subtotal (Total of this Page) >						\$5,173.00	\$920.00
Total (Use only on last page) >							

Sheet no. 1 of 3 continuation sheets attached
to Schedule of Creditors Holding Secured Claims

(Report also on
Summary of
Schedules.)

(If applicable,
report also on
Statistical
Summary of
Certain Liabilities
and Related
Data.)

B6D (Official Form 6D) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
			Lot Size: 8,352 sqft Heating: Central County: Jackson 1 Bathroom Built In 1954 Exterior Walls: Wood Tax Rate Code Area: 022					
			VALUE: \$58,407.00					
ACCT #: xxxxxxxxxxxx9691	C		DATE INCURRED: 07/02/2004 NATURE OF LIEN: Conventional Real Estate Mortgage COLLATERAL: See collateral details below REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT FORECLOSURE PROCEEDINGS STARTED ACCOUNT DELINQUENT 180 DAYS PAST DUE DATE CONVENTIONAL REAL ESTATE LOAN				\$86,544.00	\$31,990.00
WFFINANCE 800 WALNUT ST DES MOINES, IA 50309								
			Kozeny & McCubbin Collateral Details: 9016 E 74th Terrace, Raytown, MO 64133 Lot 23, Block 7, Gregory Heights, a subdivision in Raytown, Jackson County, Missouri. average sales price for similar					
			recently sold homes is \$58,407. 9016 E 74th Ter is in the 64133 ZIP code in Raytown, MO. The average price per square foot for homes for sale in 64133 is \$54 Single Family Residential 1,060 sqft					
Sheet no. 2 of 3 continuation sheets attached to Schedule of Creditors Holding Secured Claims							\$86,544.00	\$31,990.00
Subtotal (Total of this Page) > Total (Use only on last page) >								

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6D (Official Form 6D) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		Stories: 1 story Subdivision: GREGORY HEIGHTS 2 Bedrooms Lot Size: 8,352 sqft Heating: Central County: Jackson 1 Bathroom Built In 1954 Exterior Walls: Wood					
		Tax Rate Code Area: 022 VALUE: \$58,407.00					
ACCT #: xxxxxxxxxxxx9691 WFFINANCE 800 WALNUT ST DES MOINES, IA 50309	C	DATE INCURRED: Various NATURE OF LIEN: Arrearage claim COLLATERAL: 9016 E 74th Terrace, Raytown, MO 64133 REMARKS: VALUE: \$9,000.00				\$9,000.00	
Subtotal (Total of this Page) >						\$9,000.00	\$0.00
Total (Use only on last page) >						\$112,552.00	\$34,745.00

Sheet no. 3 of 3 continuation sheets attached to Schedule of Creditors Holding Secured Claims

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (04/13)

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(If Known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

☐ **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

** Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

1 continuation sheets attached

B6E (Official Form 6E) (04/13) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	C	DATE INCURRED: 2005-2012 CONSIDERATION: Taxes REMARKS: as of 5/15/12				\$20,184.86	\$20,184.86	\$0.00
ACCT #: Manager of Finance Collection Department 415 East 12 Street Kansas City, MO 64106-8401	C	DATE INCURRED: 2013 CONSIDERATION: Jackson County Tax REMARKS:				Notice Only	Notice Only	Notice Only
ACCT #: Missouri Department of Revenue PO Box 385 Jefferson City, MO 65105	C	DATE INCURRED: 2005-2012 CONSIDERATION: Taxes REMARKS: as of 5/31/13 GC Services				\$13,598.12	\$13,598.12	\$0.00
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims						\$33,782.98	\$33,782.98	\$0.00
Subtotals (Totals of this page) >						\$33,782.98		
Total > (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)								
Totals > (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$33,782.98	\$0.00

B6F (Official Form 6F) (12/07)

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxx3011 AFNI, INC. PO BOX 3097 BLOOMINGTON, IL 61702	C	DATE INCURRED: 03/20/2013 CONSIDERATION: Collection Attorney REMARKS: ACCOUNT INFORMATION DISPUTED BY CONSUMER HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT ACCOUNT SERIOUSLY PAST				\$366.00
		DUE DATE/ACCOUNT ASSIGNED TO ATTORNEY, COLLECTION AGENCY, OR CREDIT GRANTOR'S INTERNAL COLLECTION DEPARTMENT COLLECTION DEPARTMENT/AGENCY/ATTORNEY				
ACCT #: xxxxxx1906 AMCA Collection Agency PO Box 1235 Elmsford, NY 10523-0935	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: Quest Diagnostics				\$105.00
ACCT #: x2171 Anesthesia Service of Midwest 3601 NE Ralph Powell Road Lee's Summit, MO 64064	C	DATE INCURRED: 2012 CONSIDERATION: Medical Services REMARKS:				\$27.83
ACCT #: xxxx-xxx7525 Arrow Financial Services 596 W. Touhy Ave. Niles, IL 60714-4610	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Miller & Steno HSBC				Notice Only
ACCT #: xxxx-xxx2195 Arrow Financial Services 596 W. Touhy Ave. Niles, IL 60714-4610	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Gamache & Myers HSBC				Notice Only
Subtotal >						\$498.83
Total >						

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx1975 AT&T c/o Bankruptcy 1801 Valley View Lane Farmers Branch, TX 75234	C	DATE INCURRED: 2013 CONSIDERATION: Cellular REMARKS: Bay Area Credit				Notice Only
ACCT #: AT&T c/o Bankruptcy 1801 Valley View Lane Farmers Branch, TX 75234	C	DATE INCURRED: 2013 CONSIDERATION: Cellular REMARKS: Credit Collection Services				Notice Only
ACCT #: xxxxxxxx5422 AT&T c/o Bankruptcy 1801 Valley View Lane Farmers Branch, TX 75234	C	DATE INCURRED: 2013 CONSIDERATION: Cellular REMARKS: EOS CCA				Notice Only
ACCT #: Attorney General Justice Building 950 Pennsylvania Ave. NW Room 5111 Washington, DC 20530	-	DATE INCURRED: CONSIDERATION: Notice Only for Internal Revenue Service REMARKS:				Notice Only
ACCT #: xxxxxx0004 B&V CREDIT 11401 LAMAR AVENUE OVERLAND PARK, KS 66211-1598	C	DATE INCURRED: 07/01/2002 CONSIDERATION: Automobile REMARKS: CHARGED OFF ACCOUNT AUTO BAD DEBT; PLACED FOR COLLECTION; SKIP			X	\$488.00
ACCT #: xxxxxxxxxxxx8078 BANK OF AMERICA PO BOX 84006 COLUMBUS, GA 31908	C	DATE INCURRED: 10/11/1994 CONSIDERATION: Credit Card REMARKS: PURCHASED BY ANOTHER LENDER CREDIT CARD				Notice Only

Sheet no. 1 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$488.00

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx1975 Bay Area Credit Service, LLC PO Box 468449 Atlanta, GA 31146	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: AT&T			X	\$175.13
ACCT #: xxxxxx2769 BERLIN WHEELER INC 2942 SW WANAMAKER DR # 2 TOPEKA, KS 66614	C	DATE INCURRED: 06/23/2011 CONSIDERATION: Collection Attorney REMARKS: MEDICAL last letter from Berlin Wheeler says due \$1,286			X	\$108.00
ACCT #: Berlin-Wheeler Inc. PO Box 479 Topeka, KS 66601-0479	C	DATE INCURRED: 2009 CONSIDERATION: Collecting for - REMARKS: Jack E. Ferguson, DDS			X	\$61.50
ACCT #: xxxxx7-001 Butler & Associates 3706 S Topeka Boulevard, Suite 300 Topeka, KS 66609	C	DATE INCURRED: 2012 CONSIDERATION: Collecting for - REMARKS: St. Luke's East Anesthesia Services			X	\$1,615.78
ACCT #: xxxx-xxxx-xxxx-9172 CAP ONE PO BOX 85520 RICHMOND, VA 23285	C	DATE INCURRED: 05/28/2005 CONSIDERATION: Credit Card REMARKS: UNPAID BALANCE REPORTED AS A LOSS BY CREDIT GRANTOR THIS IS AN ACCOUNT IN GOOD STANDING ACCOUNT CLOSED AT CREDIT				\$4,235.00
		GRANTOR'S REQUEST CREDIT CARD CHARGE OFF AMOUNT IS 1564 Irwin James Frankel Kramer & Frank				

Sheet no. 2 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$6,195.41

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx-xxxx-xxxx-4995 CAP ONE/Lowes PO BOX 85520 RICHMOND, VA 23285	C	DATE INCURRED: 2013 CONSIDERATION: Credit Card REMARKS: Gamache & Myers				Notice Only
ACCT #: xxxx7071 Capital Management Services 726 Exchange Street Suite 700 Buffalo, NY 14210	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Arrow Financial HSBC			X	Notice Only
ACCT #: xx3584 Cardiovascular Consultants 4330 Wornall Road, #2000 Kansas City, MO 64111-3267	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS:				\$14.78
ACCT #: xxxx-xxx8992 Cash America of Missouri 9919 E 350 Highway Raytown, MO 64133	C	DATE INCURRED: 2013 CONSIDERATION: Payday Loan REMARKS: Wally Joseph Pankowski				\$200.00
ACCT #: xxxx0635 CASHCALL INC 1600 S DOUGLASS RD ANAHEIM, CA 92806	C	DATE INCURRED: 07/05/2012 CONSIDERATION: Unsecured REMARKS: ACCOUNT TRANSFERRED OR SOLD CHARGED OFF ACCOUNT UNSECURED LOAN BAD DEBT; PLACED FOR COLLECTION; SKIP PAID				Notice Only
		Western Sky Delbert Services National Recovery Solutions				

Sheet no. 3 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$214.78

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xx0689 CCB Credit Services PO Box 272 Springfield, IL 62705-0272	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: HSBC Beneficial			X	\$12,403.77
ACCT #: xxxxxxxx6676 CCM ENTERPRISES PO BOX 781317 WICHITA, KS 67278	C	DATE INCURRED: 01/20/2007 CONSIDERATION: Returned Check REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT ACCOUNT SERIOUSLY PAST DUE DATE/ACCOUNT ASSIGNED TO ATTORNEY,				\$32.00
		COLLECTION AGENCY, OR CREDIT GRANTOR'S INTERNAL COLLECTION DEPARTMENT RETURNED CHECK				
ACCT #: xxxxx xxxx1706 COMENITY BANK/LNBRYANT PO BOX 182789 COLUMBUS, OH 43218	C	DATE INCURRED: 08/20/1997 CONSIDERATION: Charge Account REMARKS: ACCOUNT TRANSFERRED TO ANOTHER OFFICE THIS IS AN ACCOUNT IN GOOD STANDING PURCHASED BY ANOTHER LENDER REVOLVING				Notice Only
		CHARGE ACCOUNT				
ACCT #: xxxxxxx7690 Credit Collection Services Two Wells Avenue Newton, MA 02459	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: AT&T				\$366.33

Sheet no. 4 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$12,802.10

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx0635 Delbert Services Corp. 7125 Pollock Drive Las Vegas, NV 89119	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Western Sky National Recovery Solutions			X	Notice Only
ACCT #: xxx5131 Diagnostic Imaging PO Box 419380 Kansas City, MO 64141	C	DATE INCURRED: 2013 CONSIDERATION: Medical Services REMARKS: Executive Financial				Notice Only
ACCT #: xx8319 Diagnostic Imaging PO Box 419380 Kansas City, MO 64141	C	DATE INCURRED: 2013 CONSIDERATION: Medical Services REMARKS: Executive Financial				Notice Only
ACCT #: xx4712 ENT Associates of Greater KC PO Box 413707 Kansas City, MO 64141-3707	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS: Kansas Counselors				Notice Only
ACCT #: xxxx6399 EOS CCA PO Box 5012 Norwell, MA 02061-5012	C	DATE INCURRED: 2011 CONSIDERATION: Collecting for - REMARKS: AT&T				\$808.71
ACCT #: Equifax Credit Information Services, Inc P.O. Box 740241 Atlanta, GA 30374	-	DATE INCURRED: CONSIDERATION: Notice Only for Credit Bureaus REMARKS:				Notice Only

Sheet no. 5 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$808.71

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxx1393 EXE FIN CON 310 ARMOUR RD. N. KANSAS CITY, MO 64116-3541	C	DATE INCURRED: 05/01/2010 CONSIDERATION: Collecting for - REMARKS: MEDICAL UNPAID Diagnostic Imaging				\$901.00
ACCT #: xxx2425 EXE FIN CON 310 ARMOUR RD. N. KANSAS CITY, MO 64116-3541	C	DATE INCURRED: 07/01/2012 CONSIDERATION: Collecting for - REMARKS: MEDICAL UNPAID Diagnostic Imaging				\$399.00
ACCT #: xxx4271 EXE FIN CON 310 ARMOUR RD. N. KANSAS CITY, MO 64116-3541	C	DATE INCURRED: 10/01/2012 CONSIDERATION: Collecting for - REMARKS: MEDICAL UNPAID				\$134.00
ACCT #: xxx7256 EXE FIN CON 310 ARMOUR RD. N. KANSAS CITY, MO 64116-3541	C	DATE INCURRED: 12/01/2010 CONSIDERATION: Collecting for - REMARKS: MEDICAL UNPAID Diagnostic Imaging				\$113.00
ACCT #: Experian P.O. Box 2002 Allen, TX 75013	-	DATE INCURRED: CONSIDERATION: Notice Only for Credit Bureaus REMARKS:				Notice Only
ACCT #: xxxxxxxxxxxx5752 FIRST PREMIER BANK 601 S MINNESOTA AVE SIOUX FALLS, SD 57104	C	DATE INCURRED: 12/31/2006 CONSIDERATION: Credit Card REMARKS: CHARGED OFF ACCOUNT CREDIT CARD BAD DEBT; PLACED FOR COLLECTION; SKIP CHARGE OFF AMOUNT IS 459				\$459.00

Sheet no. 6 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal > **\$2,006.00**

Total >
(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx3669 FIRST PREMIER BANK 601 S MINNESOTA AVE SIOUX FALLS, SD 57104	C	DATE INCURRED: 02/04/2007 CONSIDERATION: Credit Card REMARKS: CHARGED OFF ACCOUNT CREDIT CARD BAD DEBT; PLACED FOR COLLECTION; SKIP CHARGE OFF AMOUNT IS 511				\$333.00
		Jefferson Capital				
ACCT #: xxxx-xxx4792 GAMACHE & MYERS PC 1000 CAMERA AVE STE A ST LOUIS, MO 63126	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Pinnacle Credit				Notice Only
ACCT #: xxxx-xxx2854 GAMACHE & MYERS PC 1000 CAMERA AVE STE A ST LOUIS, MO 63126	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Capital One/Lowes				Notice Only
ACCT #: xxxx4578 GAMACHE & MYERS PC 1000 CAMERA AVE STE A ST LOUIS, MO 63126	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: LVNV Funding				Notice Only
ACCT #: xxxx-xxx2195 GAMACHE & MYERS PC 1000 CAMERA AVE STE A ST LOUIS, MO 63126	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Arrow Financial HSBC				Notice Only

Sheet no. 7 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal > **\$333.00**

Total >
(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: 4257 GC Services PO Box 3488 Jefferson City, MO 65105-3488	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Missouri Department of Revenue				Notice Only
ACCT #: xxxxxxxx1800 GECRB/SAMS CLUB PO BOX 965005 ORLANDO, FL 32896	C	DATE INCURRED: 03/07/2002 CONSIDERATION: Charge Account REMARKS: CLOSED OR PAID ACCOUNT/ZERO BALANCE REVOLVING CHARGE ACCOUNT				\$0.00
ACCT #: GHPOA 9205 Vaughn Ave Kansas City, MO 64133	C	DATE INCURRED: 2013 CONSIDERATION: Homeowners Dues REMARKS:				\$500.00
ACCT #: xxxxxxxxxx7571 HFC PO Box 4153-K Carol Stream, IL 60197-4153	C	DATE INCURRED: 2013 CONSIDERATION: Credit Card REMARKS: Midland Funding				Notice Only
ACCT #: xxxxxxxxxxx9554 HFC PO Box 4153-K Carol Stream, IL 60197-4153	C	DATE INCURRED: 2013 CONSIDERATION: LOC REMARKS:				Notice Only
ACCT #: xxxxxxxxxxx1111 HSBC BANK PO BOX 5253 CAROL STREAM, IL 60197	C	DATE INCURRED: 07/05/2005 CONSIDERATION: Credit Card REMARKS: ACCOUNT TRANSFERRED OR SOLD CHARGED OFF ACCOUNT CREDIT CARD BAD DEBT; PLACED FOR COLLECTION; SKIP CHARGE OFF				Notice Only

Sheet no. 8 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$500.00

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
		AMOUNT IS 1326 PAID Miller and Steeno Arrow Financial				
ACCT #: xxxxxxxxxx7306 HSBC Card Services Bankruptcy Department P.O. Box 2013 Buffalo, NY 14240	C	DATE INCURRED: 2013 CONSIDERATION: Credit Card REMARKS: CCB Credit Services				Notice Only
ACCT #: Internal Revenue Service Attn Barbara Brennan 11601 Roosevelt Blvd Stop N781 Philadelphia PA 19154-2100	-	DATE INCURRED: CONSIDERATION: Notice Only for Internal Revenue Service REMARKS:				Notice Only
ACCT #: Jack E. Ferguson, DDS 10803 Missouri 350 Kansas City, MO 64138	C	DATE INCURRED: 2013 CONSIDERATION: Dental Services REMARKS: Berlin-Wheeler - never received the bridge			X	Notice Only
ACCT #: xxxx-xxx2513 James Irwin Frankel 9300 Dielman Ind Drive Suite 100 St. Louis, MO 63132	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Capital One				Notice Only
ACCT #: xxxxxx4968 Jefferson Capital Systems 16 McLeland Road St. Cloud, MN 56303	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Premier Bankcard			X	Notice Only

Sheet no. 9 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > **\$0.00**

Total >
(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Kansas City Power & Light P.O. Box 418679 Kansas City, MO 64141-6330	C	DATE INCURRED: 2013 CONSIDERATION: Utilities REMARKS:				\$424.00
ACCT #: Kansas Counselors PO Box 14765 Shawnee Mission, KS 66285-4765	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: ENT Associates of Greater KC				\$1,129.47
ACCT #: xxxxxxxxxxxx6331 KANSAS COUNSELORS OF K PO BOX 14765 SHAWNEE MISSION, KS 66285	C	DATE INCURRED: 09/19/2012 CONSIDERATION: Collection Attorney REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT ACCOUNT SERIOUSLY PAST DUE DATE/ACCOUNT ASSIGNED TO ATTORNEY,				\$36.00
		COLLECTION AGENCY, OR CREDIT GRANTOR'S INTERNAL COLLECTION DEPARTMENT COLLECTION DEPARTMENT/AGENCY/ATTORNEY				
ACCT #: xxxxxxxxxxxx9691 Kozeny & McCubbin, LC 12400 Olive Blvd, Ste 555 St. Louis, MO 63141	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: WFFinance				Notice Only
ACCT #: xxxxEC49 Kramer & Frank, PC 1125 Grand Blvd Suite 600 Kansas City, MO 64106-2501	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Capital One				Notice Only
Sheet no. 10 of 19 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$1,589.47
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx8737 Lab Corp. PO Box 2240 Burlington, NC 27216-2240	C	DATE INCURRED: 2013 CONSIDERATION: Medical Services REMARKS: LCA Collections				Notice Only
ACCT #: xxxx8737 LCA Collections PO Box 2240 Burlington, NC 27216-2240	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Laboratory Corp of America				\$91.45
ACCT #: xxxxxxx9914 Lee's Summit Hospital PO Box 740760 Cincinnati, OH 45274-0760	C	DATE INCURRED: 2009 CONSIDERATION: Medical Services REMARKS: NCO Financial				Notice Only
ACCT #: xxxxxxxxxxx1111 LVNV FUNDING LLC PO BOX 10497 GREENVILLE, SC 29603	C	DATE INCURRED: 09/23/2011 CONSIDERATION: Factoring Company Account REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT ACCOUNT SERIOUSLY PAST DUE DATE/ACCOUNT ASSIGNED TO ATTORNEY,				\$2,927.00
		COLLECTION AGENCY, OR CREDIT GRANTOR'S INTERNAL COLLECTION DEPARTMENT FACTORY COMPANY ACCOUNT				
ACCT #: xxxxxxxxxxx5282 LVNV FUNDING LLC PO BOX 10497 GREENVILLE, SC 29603	C	DATE INCURRED: 09/23/2011 CONSIDERATION: Factoring Company Account REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT ACCOUNT SERIOUSLY PAST DUE DATE/ACCOUNT ASSIGNED TO ATTORNEY,				\$2,124.00
Sheet no. 11 of 19 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$5,142.45
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
		COLLECTION AGENCY, OR CREDIT GRANTOR'S INTERNAL COLLECTION DEPARTMENT FACTORY COMPANY ACCOUNT				
ACCT #: xxxxxxxx8185 Metro Emergency Physicians PO Box 78009 St. Louis, MO 63178-8009	C	DATE INCURRED: 2012 CONSIDERATION: Medical Services REMARKS:				\$36.33
ACCT #: MGE PO Box 219255 Kansas City, MO 64121-9255	C	DATE INCURRED: 2013 CONSIDERATION: Utilities REMARKS:				\$124.00
ACCT #: xxxxxx2299 MIDLAND FUNDING 8875 AERO DR STE 200 SAN DIEGO, CA 92123	C	DATE INCURRED: 07/20/2011 CONSIDERATION: Factoring Company Account REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT ACCOUNT SERIOUSLY PAST DUE DATE/ACCOUNT ASSIGNED TO ATTORNEY,			X	\$17,035.00
		COLLECTION AGENCY, OR CREDIT GRANTOR'S INTERNAL COLLECTION DEPARTMENT FACTORY COMPANY ACCOUNT HFC - duplicate account				
ACCT #: xxxxxxxx17-16 Midwest Pathology Assoc. PO Box 52990 Greenwood, SC 29649	C	DATE INCURRED: 2009 CONSIDERATION: Medical Services REMARKS:				\$417.00
Sheet no. <u>12</u> of <u>19</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$17,612.33
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxx-xxxx-xxxx-1111 Miller and Steeno, PC 11970 Borman Drive, Suite 250 St. Louis, MO 63146	C	DATE INCURRED: 2009 CONSIDERATION: Collecting for - REMARKS: HSBC				Notice Only
ACCT #: National Arbitration Forum PO Box 50191 Minneapolis, MN 55405-0191	-	DATE INCURRED: CONSIDERATION: Notice Only for Credit Bureaus REMARKS:				Notice Only
ACCT #: xx3412 National Recovery Solutions PO Box 322 Lockport, NY 14095-0322	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Western Sky				\$4,427.73
ACCT #: xxxxxxx34.00 Nationwide Recovery Service PO Box 8005 Cleveland, TN 37320-8005	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: Sheridan Healthcare				\$448.00
ACCT #: xxxx0460 NCO Financial Systems PO Box 15618 Wilmington, DE 19850	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: Lee's Summit Hospital				\$957.45
ACCT #: NCO Financial Systems/Portfolio Mgmt Grp 507 Prudential Road Horsham, PA 19044	-	DATE INCURRED: 2013 CONSIDERATION: Notice Only for NCO Financial REMARKS:				Notice Only

Sheet no. 13 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$5,833.18

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxx1906 Quest Diagnostics PO Box 740780 Cincinnati, OH 45274-0780	C	DATE INCURRED: 2009 CONSIDERATION: Medical Services REMARKS: AMCA Collection				Notice Only
ACCT #: Raytown Sewer 10000 East 59th Street Raytown, MO 64133	C	DATE INCURRED: 2013 CONSIDERATION: Utilities REMARKS:				\$130.00
ACCT #: xxxxx4257 RELIABLE F 8630 E. 63RD KANSAS CITY, MO 64133	C	DATE INCURRED: 04/01/2010 CONSIDERATION: Charge Account REMARKS: PAID CHARGE OFF RETURNED CHECK BAD DEBT; PLACED FOR COLLECTION; SKIP				Notice Only
ACCT #: xxxxxxxxxxxxxxxxxxxxxx0226 SALLIE MAE 11100 USA PKWY FISHERS, IN 46037	C	DATE INCURRED: 02/26/2007 CONSIDERATION: Student Loan REMARKS: HIGH CREDIT AMOUNT IS ORIGINAL LOAN AMOUNT ACCOUNT DELINQUENT 180 DAYS PAST DUE DATE OPEN ACCOUNT STUDENT				\$38,443.00
		LOAN				
ACCT #: xxxxx06-AI Sheridan Healthcare of MO PO Box 452168 Sunrise, FL 33345-2168	C	DATE INCURRED: 2009/2010 CONSIDERATION: Medical Services REMARKS: Nationwide Recovery Service				Notice Only
Sheet no. 14 of 19 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$38,573.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xx5970 St. Luke's Cancer Institute PO Box 801706 Kansas City, MO 64180-0001	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS:				\$50.00
ACCT #: xxxxxx-x0218 St. Luke's Cancer Institute PO Box 801706 Kansas City, MO 64180-0001	C	DATE INCURRED: 2013 CONSIDERATION: Medical Services REMARKS:				Notice Only
ACCT #: xx1204 St. Luke's Cardiovascular Consultants 4330 Wornall Road, #2000 Kansas City, MO 64111-3267	C	DATE INCURRED: 2010-2012 CONSIDERATION: Medical Services REMARKS:				\$134.58
ACCT #: xxxx3895 St. Luke's East Anesthesia Services 100 NE St. Lukes Blvd Lee's Summit, MO 64086-6000	C	DATE INCURRED: CONSIDERATION: Medical Services REMARKS: Butler & Associates				Notice Only
ACCT #: xxxxxxx0126 St. Luke's East Lee's Summit PO Box 530254 Atlanta, GA 30353-0254	C	DATE INCURRED: 2012 CONSIDERATION: Medical Services REMARKS:				\$1,006.83
ACCT #: xxxxxxx0562 St. Luke's East Lee's Summit PO Box 530254 Atlanta, GA 30353-0254	C	DATE INCURRED: 2012 CONSIDERATION: Medical Services REMARKS:				\$190.44
Sheet no. 15 of 19 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$1,381.85
<p align="center">Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)</p>						

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxx1446 St. Luke's East Lee's Summit PO Box 530254 Atlanta, GA 30353-0254	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS:				\$49.69
ACCT #: xxxxx2769 St. Luke's East Lee's Summit PO Box 530254 Atlanta, GA 30353-0254	C	DATE INCURRED: CONSIDERATION: Medical Services REMARKS: Berlin Wheeler				Notice Only
ACCT #: xxxxxxx1044 St. Luke's East Lee's Summit PO Box 530254 Atlanta, GA 30353-0254	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS: Venture Financial				Notice Only
ACCT #: xxxxxxx1637 St. Luke's East Lee's Summit PO Box 530254 Atlanta, GA 30353-0254	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS: Venture Financial				Notice Only
ACCT #: xxxxxxx9869 St. Luke's Health System PO Box 504538 St. Louis, MO 63150-4538	C	DATE INCURRED: CONSIDERATION: Medical Services REMARKS: Venture Financial				Notice Only
ACCT #: xxxxxxx8578 St. Luke's Health System PO Box 504538 St. Louis, MO 63150-4538	C	DATE INCURRED: CONSIDERATION: Medical Services REMARKS:				\$49.98

Sheet no. 16 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > **\$99.67**

Total >
(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxx619L St. Luke's Hospital PO Box 530254 Atlanta, GA 30353-0254	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS: Venture Financial				Notice Only
ACCT #: x-xx3800 St. Luke's Medical Group PO Box 740197 Atlanta, GA 30374-0197	C	DATE INCURRED: CONSIDERATION: Medical Services REMARKS:				\$561.00
ACCT #: x-xx9016 St. Luke's Medical Group PO Box 740197 Atlanta, GA 30374-0197	C	DATE INCURRED: CONSIDERATION: Medical Services REMARKS:				\$263.58
ACCT #: xxx-xxxxxx7513 St. Luke's Regional Laboratories PO Box 844267 Dallas, TX 75284	C	DATE INCURRED: 2013 CONSIDERATION: Medical Services REMARKS:				\$9.00
ACCT #: xx8746 Summit Gastroenterology LLC 330 20 NE St. Luke's Boulevard Lee's Summit, MO 64086	C	DATE INCURRED: 2009 CONSIDERATION: Medical Services REMARKS:				\$88.24
ACCT #: Ted Holt PO Box 21 Washington Grove, MD 20880-0021	C	DATE INCURRED: 2013 CONSIDERATION: Loc REMARKS:				\$3,605.00

Sheet no. 17 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal > **\$4,526.82**

Total >
(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxx4535 Therapeutic Radiologists, Inc. PO Box 804919 Kansas City, MO 64180-4919	C	DATE INCURRED: 2010 CONSIDERATION: Medical Services REMARKS:				\$40.00
ACCT #: TransUnion P.O. Box 2000 Chester, PA. 19022-2000	-	DATE INCURRED: CONSIDERATION: Notice Only for Credit Bureaus REMARKS:				Notice Only
ACCT #: xxxxxx2574 US DEPT ED PO BOX 7202 UTICA, NY 13504-7202	C	DATE INCURRED: 09/01/2003 CONSIDERATION: Student Loan REMARKS:				\$6,414.00
ACCT #: xxxxxxx1044 Venture Financial Services PO Box 16568 Raytown, MO 64133-0568	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: St. Luke's East				\$2,460.00
ACCT #: xxxxxxx1637 Venture Financial Services PO Box 16568 Raytown, MO 64133-0568	C	DATE INCURRED: 2011 CONSIDERATION: Collecting for - REMARKS: St. Luke's East				\$212.35
ACCT #: xxxxxxx9869 Venture Financial Services PO Box 16568 Raytown, MO 64133-0568	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: St. Luke's Health System				\$16.91

Sheet no. 18 of 19 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >

\$9,143.26

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxx619L Venture Financial Services PO Box 16568 Raytown, MO 64133-0568	C	DATE INCURRED: 2010 CONSIDERATION: Collecting for - REMARKS: St. Luke's Hospital				\$300.00
ACCT #: xxxx-xxx8992 Wally Joseph Pankowski, Attorney 705 Olive Street Suite 1100 St. Louis, MO 63101	C	DATE INCURRED: 2013 CONSIDERATION: Collecting for - REMARKS: Cash America of Missouri				Notice Only
ACCT #: xxxx0635 Western Sky Financial PO Box 370 Timber Lake, SD 57656	C	DATE INCURRED: 2013 CONSIDERATION: Payday Loan REMARKS: National Recovery Solutions Delbert Services				Notice Only
ACCT #: xxxxxxxxxxx6987 WFFINANCE 800 WALNUT ST DES MOINES, IA 50309	C	DATE INCURRED: 02/17/2003 CONSIDERATION: Automobile REMARKS: AUTO LOAN				Notice Only
Sheet no. 19 of 19 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal > \$300.00
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total > \$108,048.86

B6G (Official Form 6G) (12/07)

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
American Arbitration Association 1633 Broadway, 10th Floor New York, NY 10019	All implied or express arbitration agreements. Contract to be REJECTED
AT&T c/o Bankruptcy 1801 Valley View Lane Farmers Branch, TX 75234	cellular telephone Contract to be REJECTED
JAMS 1920 Main Street Ste. 300 Irvine, CA. 92610	All implied or express arbitration agreements. Contract to be REJECTED
National Arbitration Forum PO Box 50191 Minneapolis, MN 55405-0191	All implied or express arbitration agreements. Contract to be REJECTED

B6H (Official Form 6H) (12/07)

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B6I (Official Form 6I) (12/07)

In re **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	Dependents of Debtor and Spouse	
Married	Relationship(s): Age(s):	Relationship(s): Age(s):
Employment:	Debtor	Spouse
Occupation	Computer Technician	Secretary
Name of Employer	Raytown Quality Schools	Adecco
How Long Employed		11/28/2012
Address of Employer		Kansas City, MO

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$3,607.95	\$2,253.33
2. Estimate monthly overtime	\$0.00	\$0.00
3. SUBTOTAL	\$3,607.95	\$2,253.33
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes (includes social security tax if b. is zero)	\$377.18	\$128.87
b. Social Security Tax	\$216.88	\$126.79
c. Medicare	\$50.72	\$29.64
d. Insurance	\$38.42	\$208.13
e. Union dues	\$0.00	\$0.00
f. Retirement Mandatory	\$264.38	\$0.00
g. Other (Specify)	\$0.00	\$0.00
h. Other (Specify)	\$0.00	\$0.00
i. Other (Specify) H3E30	\$71.46	\$0.00
j. Other (Specify) RNEA Dues	\$17.99	\$0.00
k. Other (Specify)	\$0.00	\$0.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$1,037.03	\$493.43
6. TOTAL NET MONTHLY TAKE HOME PAY	\$2,570.92	\$1,759.90
7. Regular income from operation of business or profession or farm (Attach detailed stmt)	\$0.00	\$0.00
8. Income from real property	\$0.00	\$0.00
9. Interest and dividends	\$0.00	\$0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$0.00	\$0.00
11. Social security or government assistance (Specify):	\$0.00	\$0.00
12. Pension or retirement income	\$0.00	\$0.00
13. Other monthly income (Specify):		
a. NET from 2nd job	\$600.00	\$0.00
b.	\$0.00	\$0.00
c.	\$0.00	\$0.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$600.00	\$0.00
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$3,170.92	\$1,759.90
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)	\$4,930.82	

(Report also on Summary of Schedules and, if applicable,
on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

None.

B6J (Official Form 6J) (12/07)

IN RE: **Robert Edward Holt**
Debbie Ann HoltCase No. _____
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b. Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2. Utilities: a. Electricity and heating fuel b. Water and sewer c. Telephone d. Other:	\$350.00 \$150.00
3. Home maintenance (repairs and upkeep) 4. Food 5. Clothing 6. Laundry and dry cleaning 7. Medical and dental expenses 8. Transportation (not including car payments) 9. Recreation, clubs and entertainment, newspapers, magazines, etc. 10. Charitable contributions	\$425.32 \$100.00 \$20.00 \$522.00 \$275.00
11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto e. Other:	\$80.00 \$168.00
12. Taxes (not deducted from wages or included in home mortgage payments) Specify: Real Property Tax	\$138.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto: b. Other: c. Other: d. Other:	
14. Alimony, maintenance, and support paid to others: 15. Payments for support of add'l dependents not living at your home: 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17.a. Other: See attached personal expenses 17.b. Other:	\$602.50
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$2,830.82
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: general expenses - www.gasbuddy.com - general price of goods - both have chronic medical conditions.	
20. STATEMENT OF MONTHLY NET INCOME a. Average monthly income from Line 15 of Schedule I b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	\$4,930.82 \$2,830.82 \$2,100.00

Document Page 51 of 96
UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

IN RE: **Robert Edward Holt**
Debbie Ann Holt

CASE NO

CHAPTER **13**

EXHIBIT TO SCHEDULE J

Itemized Personal Expenses

Expense	Amount
Internet	\$60.00
Cable	\$78.00
Trash Service	\$18.50
Cellular Telephone	\$59.00
Student Loan - Sallie Mae 0226	\$257.00
Pet Food and Care	\$130.00
Total >	\$602.50

B6 Summary (Official Form 6 - Summary) (12/07)

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**

In re **Robert Edward Holt**
Debbie Ann Holt

Case No.

Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER	
A - Real Property	Yes	1	\$58,407.00			
B - Personal Property	Yes	6	\$71,310.18			
C - Property Claimed as Exempt	Yes	6				
D - Creditors Holding Secured Claims	Yes	4			\$112,552.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2			\$33,782.98	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	20			\$108,048.86	
G - Executory Contracts and Unexpired Leases	Yes	1				
H - Codebtors	Yes	1				
I - Current Income of Individual Debtor(s)	Yes	1				\$4,930.82
J - Current Expenditures of Individual Debtor(s)	Yes	2				\$2,830.82
TOTAL		44	\$129,717.18	\$254,383.84		

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**

In re **Robert Edward Holt**
Debbie Ann Holt

Case No.

Chapter **13**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$33,782.98
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$44,857.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$78,639.98

State the following:

Average Income (from Schedule I, Line 16)	\$4,930.82
Average Expenses (from Schedule J, Line 18)	\$2,830.82
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$6,505.61

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$34,745.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$33,782.98	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$108,048.86
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$142,793.86

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ **46** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **9/8/2013**

Signature **/s/ Robert Edward Holt**
Robert Edward Holt

Date **9/8/2013**

Signature **/s/ Debbie Ann Holt**
Debbie Ann Holt

[If joint case, both spouses must sign.]

Document Page 55 of 96
UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the TWO YEARS immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$71,435.00	2009 Income Tax Return
\$66,710.00	2011 Income Tax Return
\$68,143.00	2012 Income Tax Return
\$28,659.00	YTD 7/20/13 Robert
\$16,393.00	YTD 8/18/13 Debbie

2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the TWO YEARS immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None ☐ a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 DAYS immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Advance America Raytown, MO	25th 400 per month in the last 90 days		
CONSUMER PORTFOLIO SVC PO BOX 57071 IRVINE, CA 92619	June and July have been at 324		\$11,835.00
Title Max 9004 E State Route 350 Raytown, MO 64133	180 per month for the Jun, Jul and Aug		\$1,320.00

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 1

None ☒ b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 DAYS immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None ☐ c. All debtors: List all payments made within ONE YEAR immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**NAME AND ADDRESS OF CREDITOR
 AND RELATIONSHIP TO DEBTOR**
Ted Holt
Brother
Gaitherburg, MD

**DATE OF
 PAYMENT**
**25th (400 in the
 last year)**

AMOUNT PAID
\$95.00

AMOUNT STILL OWING
\$3,605.00

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within ONE YEAR immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**CAPTION OF SUIT AND
 CASE NUMBER**
0916-CV24792 - PINNACLE
CREDIT SERVICES LLC V BOB
HOLT

NATURE OF PROCEEDING
Suit on Account

**COURT OR AGENCY
 AND LOCATION**
In the 16th Judicial
Circuit Court, Jackson
County, Missouri

**STATUS OR
 DISPOSITION**
Judgment
Date: 11/10/2009
Description:
Judgment
Entered Against:
HOLT, BOB
Amount of
Judgment: see
text Date of
Satisfaction:
01/06/2011
Text:
\$296.30 + int +
\$40.00 sps fees +
costs

0716-CV32854 - CAPITAL ONE
BANK V ROBERT HOLT

Breach of Contract

In the 16th Judicial
Circuit Court, Jackson
County, Missouri

Judgment
Date: 12/11/2007
Description:
Judgment
Entered Against:
HOLT,
ROBERT
Amount of
Judgment: see
text Date of
Satisfaction:

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**

In re: **Robert Edward Holt
Debbie Ann Holt**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 2

			08/15/2008 Text: \$892.67 + \$35.00 SPS FEES + INT + COSTS
0816-CV02513 - CAPITAL ONE BANK V DEBBIE A HOLT	Breach of Contract	In the 16th Judicial Circuit Court, Jackson County, Missouri	Judgment Date: 03/18/2008 Description: Judgment Entered Against: HOLT, DEBBIE A Amount of Judgment: see text Date of Satisfaction: not yet on file Text: \$1938.42 + \$35.00 SPS FEES + INT + COSTS
1016-CV38992 - CASH AMERICA OF MISSOURI INC V ROBERT E HOLT	Contract-Other	In the 16th Judicial Circuit Court, Jackson, County, Missouri	Judgment Date: 04/06/2011 Description: Judgment Entered Against: HOLT, ROBERT E Amount of Judgment: see text Date of Satisfaction: not yet on file Text: COUNT I - \$ 1,006.25 + post- judgment interest at the rate of 9.000 % per annum + court costs, including process server fees COUNTS II & III - dismissed without prejudice
IRS			
St. Luke's East Anesthesia Services v. Debbie Ann Holt and Robert Holt 12LA09240		In the District Court of Johnson County, Kansas	
1316-CV07721 - ST LUKES EAST ANESTHESIA SER V	CC Reg Foreign Jgmt (excl DR)	Jackson County, Kansas City	Judgment Date: 03/26/2013

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**

In re: **Robert Edward Holt
Debbie Ann Holt**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 3

DEBBIE A HOLT ET AL

Description:
Judgment
Entered Against:
HOLT, DEBBIE
ANN
Amount of
Judgment: see
text Date of
Satisfaction: not
yet on file
Text:
Foreign
Judgment-Johnson
County, KS-11/29/12-
\$1286.00 Principal +
\$365.87 Prejudgment
Interest + \$77.50 plus
\$5.75 Cost Incurred to
Date (\$1735.12 total)
Next Judgment
Date: 03/26/2013
Description:
Judgment
Entered Against:
HOLT,
ROBERT
Amount of
Judgment: see
text Date of
Satisfaction: not
yet on file
Text:
Foreign
Judgment-Johnson
County, KS-11/29/12-
\$1286.00 Principal +
\$365.87 Prejudgment
Interest + \$77.50 plus
\$5.75 Cost Incurred to
Date (\$1735.12 total)

**0916-CV37525 - ARROW
FINANCIAL SERVICES LLC V
DEBBIE A HOLT**

Breach of Contract

**In the 16th Judicial
Circuit Court, Jackson,
County, Missouri**

Judgment
Date: 02/09/2010
Description:
Judgment
Entered Against:
HOLT, DEBBIE
A
Amount of
Judgment: see
text Date of
Satisfaction: not
yet on file
Text:

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**

In re: **Robert Edward Holt
Debbie Ann Holt**

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 4

1016-CV22195 - ARROW FINANCIAL SERVICE LLC V DEBIE A HOLT	Suit on Account	In the 16th Judicial Circuit Court, Jackson, County, Missouri	<p>\$2047.34 + int + costs + \$40.00 sps fees</p> <p>Judgment Date: 12/21/2010 Description: Judgment Entered Against: HOLT, DEBIE A Amount of Judgment: see text Date of Satisfaction: not yet on file Text: \$45.00 sps fees + int + costs + \$1275.00 Assignment of judgment to LVNV Funding LLC on 05- APR-2012</p>
04CV207642 - STATE OF MISSOURI V ROBERT HOLT	AC Delinquent State Taxes	Jackson County, Independence	<p>05/13/2004 Dismiss by Ct w/o Prejudice Associated Entries: 03/19/2004 - Hearing Scheduled Scheduled For: 05/19/2004; 1:30 PM ; ROBERT L TROUT; Setting: 1; Jackson - Independence</p>
1016-MC17209 - DEPARTMENT OF REVENUE V ROBERT E HOLT	CC Cert of Lien-DOR Taxes	Jackson County, Independence	<p>Judgment Date: 10/12/2010 Description: Judgment Entered Against: HOLT, ROBERT E Amount of Judgment: \$2,471.85 Date of Satisfaction: not yet on file</p>
1116-MC21837 - DEPARTMENT OF REVENUE V ROBERT E HOLT	CC Cert of Lien-DOR Taxes	Jackson County, Independence	<p>Judgment Date: 12/19/2011 Description: Judgment Entered Against:</p>

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 5

HOLT,
ROBERT E
 Amount of
 Judgment: see
 text Date of
 Satisfaction: not
 yet on file
 Text:
\$10,099.12

1016-CV03389 - ARROW
FINANCIAL SERVICES LLC V
DEBBIE A HOLT

Suit on Account

Jackson County,
Kansas City

05/06/2010
Dismiss by Ct
w/o Prejudice
DISMISSED
FOR WANT OF
PROSECUTION per
Local Rule 37.4

None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED
Capital One Bank

DATE OF SEIZURE

DESCRIPTION AND VALUE
OF PROPERTY

Garnishment Number: Garnishment
Issued Date:
08-GARN-6018 04/01/2008

Garnishment Number: Garnishment
Issued Date:
10-EXEC-2005 02/24/2010

Cash America

Garnishment Number: Garnishment
Issued Date:
13-EXEC-7675 07/12/2013
12-GARN-19813 10/16/2012
11-GARN-23418 12/20/2011
11-GARN-10698 05/26/2011

IRS

St. Lukes

Garnishment Number: Garnishment
Issued Date:
13-GARN-6968 04/19/2013

Arrow Financial

Garnishment Number: Garnishment
Issued Date:
13-EXEC-7042 06/25/2013

Garnishment Number: Garnishment
Issued Date:
11-EXEC-8739 09/02/2011
11-GARN-11002 06/02/2011
11-EXEC-3085 03/15/2011

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS
Continuation Sheet No. 6

Pinnacle Credit

Garnishment Number: Garnishment
Issued Date:
10-GARN-17270 09/23/2010

5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
WFFINANCE 800 WALNUT ST DES MOINES, IA 50309	9/12/12	Started foreclosure on the home

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 DAYS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None ☐ List all gifts or charitable contributions made within ONE YEAR immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
Council for Blind Missouri 64133		5/12/12 and 6/2013	Clothing

8. Losses

None ☐ List all losses from fire, theft, other casualty or gambling within ONE YEAR immediately preceding the commencement of this case OR SINCE THE COMMENCEMENT OF THIS CASE. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
1998 Jeep Grand Cherokee	stolen from driveway collision only, no insurance for theft	2/29/12
	contained: Zenith Television Space Heater Tool Set for Computer Repair Blankets	

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 7

Zenith Television
Space Heater
Tool Set for Computer Repair
Blankets

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within ONE YEAR immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Foley Law 4014 S. Lynn Crt. Drive Ste. B Independence, MO 64052	\$359.00 paid	\$3,000.00 Attorney's Fee
Hummingbird Control #973265-I1083173W-48U		

10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within TWO YEARS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Cash America 17 Triangle Park Cincinnati, OH 45246	June 2012	wedding band, necklace, chains 350 used for living expenses
Albins	Aug 2013	Opal ring Bracelets Chain Diamond earrings misc items 464 - used to pay attorney's fees
Cash America 17 Triangle Park Cincinnati, OH 45246	June 2012	30/30 12 guage shotgun Marlin and remington 150

None ☒ b. List all property transferred by the debtor within TEN YEARS immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 8

11. Closed financial accounts

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within ONE YEAR immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
First Federal - two accounts	Checking - shut down due to theft of vehicle and reopened two accounts.	

12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 DAYS preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None



If the debtor has moved within THREE YEARS immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within EIGHT YEARS immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 9

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None ☒ a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within SIX YEARS immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
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STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 10

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within SIX YEARS immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement ONLY if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None ☒ a. List all bookkeepers and accountants who within TWO YEARS immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

None ☒ b. List all firms or individuals who within TWO YEARS immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None ☒ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within TWO YEARS immediately preceding the commencement of this case.

20. Inventories

None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None ☒ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within ONE YEAR immediately preceding the commencement of this case.

None ☒ b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within ONE YEAR immediately preceding the commencement of this case.

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

In re: **Robert Edward Holt**
Debbie Ann Holt

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 11

23. Withdrawals from a partnership or distributions by a corporation

None ☒ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during ONE YEAR immediately preceding the commencement of this case.

24. Tax Consolidation Group

None ☒ If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within SIX YEARS immediately preceding the commencement of the case.

25. Pension Funds

None ☒ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within SIX YEARS immediately preceding the commencement of the case.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 9/8/2013

Signature /s/ Robert Edward Holt
 of Debtor Robert Edward Holt

Date 9/8/2013

Signature /s/ Debbie Ann Holt
 of Joint Debtor Debbie Ann Holt
 (if any)

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.
18 U.S.C. §§ 152 and 3571

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION**

In re **Robert Edward Holt**
Debbie Ann Holt

Case No. _____

Chapter 13

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Robert Edward Holt**Debbie Ann Holt**

Printed Name(s) of Debtor(s)

Case No. (if known) _____

X /s/ Robert Edward Holt

Signature of Debtor

9/8/2013

Date

X /s/ Debbie Ann Holt

Signature of Joint Debtor (if any)

9/8/2013

Date

Certificate of Compliance with § 342(b) of the Bankruptcy Code

I, Rachel Lynn Foley, counsel for Debtor(s), hereby certify that I delivered to the Debtor(s) the Notice required by § 342(b) of the Bankruptcy Code.

/s/ Rachel Lynn Foley

Rachel Lynn Foley, Attorney for Debtor(s)

Bar No.: 47121

Foley Law

4016 S. Lynn Court Drive

Ste. B

Independence, MO 64055

Phone: (816) 472-4357

Fax: (888) 876-1591

E-Mail: clients@kcbankruptcy.com

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) ONLY if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a JOINT CASE (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days BEFORE the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income
(\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$46 administrative fee: Total fee \$1213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

IN RE: **Robert Edward Holt**
Debbie Ann Holt

CASE NO

CHAPTER 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept:	<u>\$3,000.00</u>
Prior to the filing of this statement I have received:	<u>\$359.00</u>
Balance Due:	<u>\$2,641.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

9/8/2013

Date

/s/ Rachel Lynn Foley

Rachel Lynn Foley

Foley Law

4016 S. Lynn Court Drive

Ste. B

Independence, MO 64055

Phone: (816) 472-4357 / Fax: (888) 876-1591

Bar No. 47121

/s/ Robert Edward Holt

Robert Edward Holt

/s/ Debbie Ann Holt

Debbie Ann Holt

Document Page 71 of 96
UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI
KANSAS CITY DIVISION

IN RE: **Robert Edward Holt**
Debbie Ann Holt

CASE NO

CHAPTER **13**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 9/8/2013

Signature /s/ Robert Edward Holt
Robert Edward Holt

Date 9/8/2013

Signature /s/ Debbie Ann Holt
Debbie Ann Holt

AFNI, INC.
xxxxxx3011
PO BOX 3097
BLOOMINGTON, IL 61702

AMCA Collection Agency
xxxxxx1906
PO Box 1235
Elmsford, NY 10523-0935

American Arbitration Association
1633 Broadway, 10th Floor
New York, NY 10019

Anesthesia Service of Midwest
x2171
3601 NE Ralph Powell Road
Lee's Summit, MO 64064

Arrow Financial Services
xxxx-xxx7525
596 W. Touhy Ave.
Niles, IL 60714-4610

Arrow Financial Services
xxxx-xxx2195
596 W. Touhy Ave.
Niles, IL 60714-4610

AT&T
xxxx1975
c/o Bankruptcy
1801 Valley View Lane
Farmers Branch, TX 75234

AT&T
c/o Bankruptcy
1801 Valley View Lane
Farmers Branch, TX 75234

AT&T
xxxxxxxx5422
c/o Bankruptcy
1801 Valley View Lane
Farmers Branch, TX 75234

Attorney General
Justice Building
950 Pennsylvania Ave. NW Room 5111
Washington, DC 20530

B&V CREDIT
xxxxxx0004
11401 LAMAR AVENUE
OVERLAND PARK, KS 66211-1598

BANK OF AMERICA
xxxxxxxxxxxxxx8078
PO BOX 84006
COLUMBUS, GA 31908

Bay Area Credit Service, LLC
xxxxx1975
PO Box 468449
Atlanta, GA 31146

BERLIN WHEELER INC
xxxxxx2769
2942 SW WANAMAKER DR # 2
TOPEKA, KS 66614

Berlin-Wheeler Inc.
PO Box 479
Topeka, KS 66601-0479

Butler & Associates
xxxxxx7-001
3706 S Topeka Boulevard, Suite 300
Topeka, KS 66609

CAP ONE
xxxx-xxxx-xxxx-9172
PO BOX 85520
RICHMOND, VA 23285

CAP ONE/Lowes
xxxx-xxxx-xxxx-4995
PO BOX 85520
RICHMOND, VA 23285

Capital Management Services
xxxx7071
726 Exchange Street
Suite 700
Buffalo, NY 14210

Cardiovascular Consultants
xx3584
4330 Wornall Road, #2000
Kansas City, MO 64111-3267

Cash America of Missouri
xxxx-xxx8992
9919 E 350 Highway
Raytown, MO 64133

CASHCALL INC
xxxx0635
1600 S DOUGLASS RD
ANAHEIM, CA 92806

CCB Credit Services
xx0689
PO Box 272
Springfield, IL 62705-0272

CCM ENTERPRISES
xxxxxxxxxx6676
PO BOX 781317
WICHITA, KS 67278

COMENITY BANK/LNBRYANT
xxxxx xxxxl706
PO BOX 182789
COLUMBUS, OH 43218

CONSUMER PORTFOLIO SVC
xxxxxxx6438
PO BOX 57071
IRVINE, CA 92619

Credit Collection Services
xxxxxxx7690
Two Wells Avenue
Newton, MA 02459

Delbert Services Corp.
xxxx0635
7125 Pollock Drive
Las Vegas, NV 89119

Diagnostic Imaging
xxx5131
PO Box 419380
Kansas City, MO 64141

Diagnostic Imaging
xx8319
PO Box 419380
Kansas City, MO 64141

ENT Associates of Greater KC
xx4712
PO Box 413707
Kansas City, MO 64141-3707

EOS CCA
xxxx6399
PO Box 5012
Norwell, MA 02061-5012

Equifax Credit Information Services, Inc
P.O. Box 740241
Atlanta, GA 30374

EXE FIN CON
xxx1393
310 ARMOUR RD.
N. KANSAS CITY, MO 64116-3541

EXE FIN CON
xxx2425
310 ARMOUR RD.
N. KANSAS CITY, MO 64116-3541

EXE FIN CON
xxx4271
310 ARMOUR RD.
N. KANSAS CITY, MO 64116-3541

EXE FIN CON
xxx7256
310 ARMOUR RD.
N. KANSAS CITY, MO 64116-3541

Experian
P.O. Box 2002
Allen, TX 75013

FIRST PREMIER BANK
xxxxxxxxxxxxx5752
601 S MINNESOTA AVE
SIOUX FALLS, SD 57104

FIRST PREMIER BANK
xxxxxxxxxxxxx3669
601 S MINNESOTA AVE
SIOUX FALLS, SD 57104

GAMACHE & MYERS PC
xxxx-xxx4792
1000 CAMERA AVE STE A
ST LOUIS, MO 63126

GAMACHE & MYERS PC
xxxx-xxx2854
1000 CAMERA AVE STE A
ST LOUIS, MO 63126

GAMACHE & MYERS PC
xxxx4578
1000 CAMERA AVE STE A
ST LOUIS, MO 63126

GAMACHE & MYERS PC
xxxx-xxx2195
1000 CAMERA AVE STE A
ST LOUIS, MO 63126

GC Services
4257
PO Box 3488
Jefferson City, MO 65105-3488

GECRB/SAMS CLUB
xxxxxxxxx1800
PO BOX 965005
ORLANDO, FL 32896

GHPOA
9205 Vaughn Ave
Kansas City, MO 64133

HFC
xxxxxxxxxxx7571
PO Box 4153-K
Carol Stream, IL 60197-4153

HFC
xxxxxxxxxxxxx9554
PO Box 4153-K
Carol Stream, IL 60197-4153

HSBC BANK
xxxxxxxxxxxxx1111
PO BOX 5253
CAROL STREAM, IL 60197

HSBC Card Services
xxxxxxxxxxx7306
Bankruptcy Department
P.O. Box 2013
Buffalo, NY 14240

Internal Revenue Service
Attn Barbara Brennan
11601 Roosevelt Blvd Stop N781
Philadelphia PA 19154-2100

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

Jack E. Ferguson, DDS
10803 Missouri 350
Kansas City, MO 64138

James Irwin Frankel
xxxx-xxx2513
9300 Dielman Ind Drive
Suite 100
St. Louis, MO 63132

JAMS
1920 Main Street Ste. 300
Irvine, CA. 92610

Jefferson Capital Systems
xxxxxxx4968
16 McLeland Road
St. Cloud, MN 56303

Kansas City Power & Light
P.O. Box 418679
Kansas City, MO 64141-6330

Kansas Counselors
PO Box 14765
Shawnee Mission, KS 66285-4765

KANSAS COUNSELORS OF K
xxxxxxxxxxxxx6331
PO BOX 14765
SHAWNEE MISSION, KS 66285

Kozeny & McCubbin, LC
xxxxxxxxxxxxx9691
12400 Olive Blvd, Ste 555
St. Louis, MO 63141

Kramer & Frank, PC
xxxxEC49
1125 Grand Blvd
Suite 600
Kansas City, MO 64106-2501

Lab Corp.
xxxx8737
PO Box 2240
Burlington, NC 27216-2240

LCA Collections
xxxx8737
PO Box 2240
Burlington, NC 27216-2240

Lee's Summit Hospital
xxxxxxx9914
PO Box 740760
Cincinnati, OH 45274-0760

LVNV FUNDING LLC
xxxxxxxxxxxxx1111
PO BOX 10497
GREENVILLE, SC 29603

LVNV FUNDING LLC
xxxxxxxxxxxxx5282
PO BOX 10497
GREENVILLE, SC 29603

Manager of Finance
Collection Department
415 East 12 Street
Kansas City, MO 64106-8401

Metro Emergency Physicians
xxxxxxxx8185
PO Box 78009
St. Louis, MO 63178-8009

MGE
PO Box 219255
Kansas City, MO 64121-9255

MIDLAND FUNDING
xxxxxx2299
8875 AERO DR STE 200
SAN DIEGO, CA 92123

Midwest Pathology Assoc.
xxxxxxxx17-16
PO Box 52990
Greenwood, SC 29649

Miller and Steeno, PC
xxxx-xxxx-xxxx-1111
11970 Borman Drive, Suite 250
St. Louis, MO 63146

Missouri Department of Revenue
PO Box 385
Jefferson City, MO 65105

National Arbitration Forum
PO Box 50191
Minneapolis, MN 55405-0191

National Recovery Solutions
xx3412
PO Box 322
Lockport, NY 14095-0322

Nationwide Recovery Service
xxxxxxx34.00
PO Box 8005
Cleveland, TN 37320-8005

NCO Financial Systems
xxxx0460
PO Box 15618
Wilmington, DE 19850

NCO Financial Systems/Portfolio Mgmt Grp
507 Prudential Road
Horsham, PA 19044

Quest Diagnostics
xxxxxxx1906
PO Box 740780
Cincinnati, OH 45274-0780

Raytown Sewer
10000 East 59th Street
Raytown, MO 64133

RELIABLE F
xxxxx4257
8630 E. 63RD
KANSAS CITY, MO 64133

SALLIE MAE
xxxxxxxxxxxxxxxxxxxx0226
11100 USA PKWY
FISHERS, IN 46037

Sheridan Healthcare of MO
xxxxx06-AI
PO Box 452168
Sunrise, FL 33345-2168

St. Luke's Cancer Institute
xx5970
PO Box 801706
Kansas City, MO 64180-0001

St. Luke's Cancer Institute
xxxxxx-x0218
PO Box 801706
Kansas City, MO 64180-0001

St. Luke's Cardiovascular Consultants
xx1204
4330 Wornall Road, #2000
Kansas City, MO 64111-3267

St. Luke's East Anesthesia Services
xxxx3895
100 NE St. Lukes Blvd
Lee's Summit, MO 64086-6000

St. Luke's East Lee's Summit
xxxxxxx0126
PO Box 530254
Atlanta, GA 30353-0254

St. Luke's East Lee's Summit
xxxxxxx0562
PO Box 530254
Atlanta, GA 30353-0254

St. Luke's East Lee's Summit
xxxxxxx1446
PO Box 530254
Atlanta, GA 30353-0254

St. Luke's East Lee's Summit
xxxxx2769
PO Box 530254
Atlanta, GA 30353-0254

St. Luke's East Lee's Summit
xxxxxxx1044
PO Box 530254
Atlanta, GA 30353-0254

St. Luke's East Lee's Summit
xxxxxxx1637
PO Box 530254
Atlanta, GA 30353-0254

St. Luke's Health System
xxxxxxx9869
PO Box 504538
St. Louis, MO 63150-4538

St. Luke's Health System
xxxxxxx8578
PO Box 504538
St. Louis, MO 63150-4538

St. Luke's Hospital
xxxxxxx619L
PO Box 530254
Atlanta, GA 30353-0254

St. Luke's Medical Group
x-xx3800
PO Box 740197
Atlanta, GA 30374-0197

St. Luke's Medical Group
x-xx9016
PO Box 740197
Atlanta, GA 30374-0197

St. Luke's Regional Laboratories
xxx-xxxxxx7513
PO Box 844267
Dallas, TX 75284

Summit Gastroenterology LLC
xx8746
330
20 NE St. Luke's Boulevard
Lee's Summit, MO 64086

Ted Holt
PO Box 21
Washington Grove, MD 20880-0021

Therapeutic Radiologists, Inc.
xxx4535
PO Box 804919
Kansas City, MO 64180-4919

Title Max
9004 E State Route 350
Raytown, MO 64133

TransUnion
P.O. Box 2000
Chester, PA. 19022-2000

US DEPT ED
xxxxxxx2574
PO BOX 7202
UTICA, NY 13504-7202

Venture Financial Services
xxxxxxx1044
PO Box 16568
Raytown, MO 64133-0568

Venture Financial Services
xxxxxxx1637
PO Box 16568
Raytown, MO 64133-0568

Venture Financial Services
xxxxxxx9869
PO Box 16568
Raytown, MO 64133-0568

Venture Financial Services
xxxxxxx619L
PO Box 16568
Raytown, MO 64133-0568

Wally Joseph Pankowski, Attorney
xxxx-xxx8992
705 Olive Street
Suite 1100
St. Louis, MO 63101

Western Sky Financial
xxxx0635
PO Box 370
Timber Lake, SD 57656

WFF CARDS
xxxxxxxxxxxxx1386
3201 N 4TH AVE
SIOUX FALLS, SD 57104

WFFINANCE
xxxxxxxxxxxxx9691
800 WALNUT ST
DES MOINES, IA 50309

WFFINANCE
xxxxxxxxxxxxx6987
800 WALNUT ST
DES MOINES, IA 50309

B 22C (Official Form 22C) (Chapter 13) (04/13)In re: **Robert Edward Holt**
Debbie Ann Holt

Case Number:

According to the calculations required by this statement:

- ☐ The applicable commitment period is 3 years.
☒ The applicable commitment period is 5 years.
☒ Disposable income is determined under § 1325(b)(3).
☐ Disposable income is not determined under § 1325(b)(3).

(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly.
 Joint debtors may complete one statement only.

Part I. REPORT OF INCOME																	
Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. <input type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. <input checked="" type="checkbox"/> Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.																	
1	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.			Column A Debtor's Income	Column B Spouse's Income												
2	Gross wages, salary, tips, bonuses, overtime, commissions.			\$4,470.03	\$2,035.58												
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. <table border="1" style="width: 100%; margin-top: 5px;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 45%;">Gross receipts</td> <td style="width: 20%;">\$0.00</td> <td style="width: 30%;">\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td>\$0.00</td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td>Business income</td> <td colspan="2">Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$0.00	\$0.00	b.	Ordinary and necessary business expenses	\$0.00	\$0.00	c.	Business income	Subtract Line b from Line a		\$0.00	\$0.00
a.	Gross receipts	\$0.00	\$0.00														
b.	Ordinary and necessary business expenses	\$0.00	\$0.00														
c.	Business income	Subtract Line b from Line a															
4	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. <table border="1" style="width: 100%; margin-top: 5px;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 45%;">Gross receipts</td> <td style="width: 20%;">\$0.00</td> <td style="width: 30%;">\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary operating expenses</td> <td>\$0.00</td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td>Rent and other real property income</td> <td colspan="2">Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$0.00	\$0.00	b.	Ordinary and necessary operating expenses	\$0.00	\$0.00	c.	Rent and other real property income	Subtract Line b from Line a		\$0.00	\$0.00
a.	Gross receipts	\$0.00	\$0.00														
b.	Ordinary and necessary operating expenses	\$0.00	\$0.00														
c.	Rent and other real property income	Subtract Line b from Line a															
5	Interest, dividends, and royalties.			\$0.00	\$0.00												
6	Pension and retirement income.			\$0.00	\$0.00												
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.			\$0.00	\$0.00												
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:			\$0.00	\$0.00												
<table border="1" style="width: 100%; margin-top: 5px;"> <tr> <td style="width: 45%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 20%;">Debtor</td> <td style="width: 35%;">Spouse</td> </tr> <tr> <td></td> <td style="text-align: center;">\$0.00</td> <td style="text-align: center;">\$0.00</td> </tr> </table>				Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor	Spouse		\$0.00	\$0.00	\$0.00	\$0.00						
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor	Spouse															
	\$0.00	\$0.00															
9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			\$0.00	\$0.00												
<table border="1" style="width: 100%; margin-top: 5px;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 45%;"></td> <td style="width: 50%;"></td> </tr> <tr> <td>b.</td> <td></td> <td></td> </tr> </table>				a.			b.			\$0.00	\$0.00						
a.																	
b.																	

B 22C (Official Form 22C) (Chapter 13) (04/13)

10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	\$4,470.03	\$2,035.58
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	\$6,505.61	

Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD

12	Enter the amount from Line 11.	\$6,505.61									
13	<p>Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.</p> <table> <tr> <td>a.</td> <td></td> <td></td> </tr> <tr> <td>b.</td> <td></td> <td></td> </tr> <tr> <td>c.</td> <td></td> <td></td> </tr> </table> <p>Total and enter on Line 13.</p>	a.			b.			c.			\$0.00
a.											
b.											
c.											
14	Subtract Line 13 from Line 12 and enter the result.	\$6,505.61									
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$78,067.32									
16	<p>Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p> <p>a. Enter debtor's state of residence: <u>Missouri</u> b. Enter debtor's household size: <u>2</u></p>	\$51,784.00									
17	<p>Application of § 1325(b)(4). Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement.</p> <p><input checked="" type="checkbox"/> The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.</p>										

Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME

18	Enter the amount from Line 11.	\$6,505.61									
19	<p>Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.</p> <table> <tr> <td>a.</td> <td></td> <td></td> </tr> <tr> <td>b.</td> <td></td> <td></td> </tr> <tr> <td>c.</td> <td></td> <td></td> </tr> </table> <p>Total and enter on Line 19.</p>	a.			b.			c.			\$0.00
a.											
b.											
c.											

B 22C (Official Form 22C) (Chapter 13) (04/13)

20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$6,505.61
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.	\$78,067.32
22	Applicable median family income. Enter the amount from Line 16.	\$51,784.00
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. <input type="checkbox"/> The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. DO NOT COMPLETE PARTS IV, V, OR VI.	

Part IV. CALCULATION OF DEDUCTIONS FROM INCOME**Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)**

24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number or persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						\$1,053.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.						
	Persons under 65 years of age			Persons 65 years of age or older			
	a1.	Allowance per person	\$60.00	a2.	Allowance per person	\$144.00	
	b1.	Number of persons	2	b2.	Number of persons		
	c1.	Subtotal	\$120.00	c2.	Subtotal	\$0.00	\$120.00
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						\$517.00

B 22C (Official Form 22C) (Chapter 13) (04/13)

25B	<p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" data-bbox="203 359 1339 506"> <tr> <td data-bbox="203 359 251 394">a.</td> <td data-bbox="267 359 998 394">IRS Housing and Utilities Standards; mortgage/rent expense</td> <td data-bbox="1015 359 1339 394">\$1,005.00</td> </tr> <tr> <td data-bbox="203 394 251 468">b.</td> <td data-bbox="267 394 998 468">Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47</td> <td data-bbox="1015 394 1339 468">\$784.22</td> </tr> <tr> <td data-bbox="203 468 251 506">c.</td> <td data-bbox="267 468 998 506">Net mortgage/rental expense</td> <td data-bbox="1015 468 1339 506">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Housing and Utilities Standards; mortgage/rent expense	\$1,005.00	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$784.22	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$220.78
a.	IRS Housing and Utilities Standards; mortgage/rent expense	\$1,005.00									
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$784.22									
c.	Net mortgage/rental expense	Subtract Line b from Line a.									
26	<p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p>										
27A	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$424.00									
27B	<p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$0.00									

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28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. DO NOT ENTER AN AMOUNT LESS THAN ZERO.		
	a.	IRS Transportation Standards, Ownership Costs	\$517.00
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$217.80
	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a. \$299.20
29	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. DO NOT ENTER AN AMOUNT LESS THAN ZERO.		
	a.	IRS Transportation Standards, Ownership Costs	\$517.00
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$24.30
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a. \$492.70
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. DO NOT INCLUDE REAL ESTATE OR SALES TAXES.		\$835.00
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. DO NOT INCLUDE DISCRETIONARY AMOUNTS, SUCH AS VOLUNTARY 401(K) CONTRIBUTIONS.		\$282.37
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. DO NOT INCLUDE PREMIUMS FOR INSURANCE ON YOUR DEPENDENTS, FOR WHOLE LIFE OR FOR ANY OTHER FORM OF INSURANCE.		\$0.00
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. DO NOT INCLUDE PAYMENTS ON PAST DUE OBLIGATIONS INCLUDED IN LINE 49.		\$0.00
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.		\$0.00
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare--such as baby-sitting, day care, nursery and preschool. DO NOT INCLUDE OTHER EDUCATIONAL PAYMENTS.		\$0.00
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. DO NOT INCLUDE PAYMENTS FOR HEALTH INSURANCE OR HEALTH SAVINGS ACCOUNTS LISTED IN LINE 39.		\$380.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service--such as pagers, call waiting, caller id, special long distance, or internet service--to the extent necessary for your health and welfare or that of your dependents. DO NOT INCLUDE ANY AMOUNT PREVIOUSLY DEDUCTED.		\$0.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.		\$4,624.05

Subpart B: Additional Living Expense Deductions**Note: Do not include any expenses that you have listed in Lines 24-37**

39	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.		
	a. Health Insurance	\$230.54	
	b. Disability Insurance	\$0.00	
	c. Health Savings Account	\$0.00	
Total and enter on Line 39			\$230.54
IF YOU DO NOT ACTUALLY EXPEND THIS TOTAL AMOUNT, state your actual total average monthly expenditures in the space below: _____			
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. DO NOT INCLUDE PAYMENTS LISTED IN LINE 34.		\$0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.		\$0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUAL EXPENSES, AND YOU MUST DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.		
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUAL EXPENSES, AND YOU MUST EXPLAIN WHY THE AMOUNT CLAIMED IS REASONABLE AND NECESSARY AND NOT ALREADY ACCOUNTED FOR IN THE IRS STANDARDS.		\$0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) YOU MUST DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.		
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). DO NOT INCLUDE ANY AMOUNT IN EXCESS OF 15% OF YOUR GROSS MONTHLY INCOME.		\$0.00
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.		\$230.54

B 22C (Official Form 22C) (Chapter 13) (04/13)**Subpart C: Deductions for Debt Payment**

47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.			
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?
a.	CONSUMER PORTFOLIO SVC	2006 Ford F-150	\$217.80	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
b.	Title Max	1999 Oldsmobile	\$24.30	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
c.	WFF CARDS	9016 E 74th Terrace, Raytow	\$64.22	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
	(See continuation page.)		Total: Add Lines a, b and c	
				\$1,026.32
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.			
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount	
a.	WFFINANCE	9016 E 74th Terrace, Raytown,	\$150.00	
b.				
c.				
	Total: Add Lines a, b and c			\$150.00
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. DO NOT INCLUDE CURRENT OBLIGATIONS, SUCH AS THOSE SET OUT IN LINE 33.			\$563.05
50	Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.			
	a.	Projected average monthly chapter 13 plan payment.	\$2,100.00	
	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	4.1 %	
	c.	Average monthly administrative expense of chapter 13 case	Total: Multiply Lines a and b	\$86.10
51	Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.			\$1,825.47
Subpart D: Total Deductions from Income				
52	Total of all deductions from income. Enter the total of Lines 38, 46 and 51.			\$6,680.06

Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)

53	Total current monthly income. Enter the amount from Line 20.	\$6,505.61
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.	

B 22C (Official Form 22C) (Chapter 13) (04/13)

47. Future payments on secured claims (continued):

Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?
WFFINANCE	9016 E 74th Terrace, Raytown, MO 6	\$720.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no

Current Monthly Income Calculation DetailsIn re: **Robert Edward Holt**
Debbie Ann HoltCase Number:
Chapter: **13****2. Gross wages, salary, tips, bonuses, overtime commissions.**

Debtor or Spouse's Income	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
<u>Debtor</u>	Raytown Mar fowar						
	\$3,573.85	\$3,573.85	\$3,573.85	\$3,573.85	\$3,607.95	\$3,607.95	\$3,585.22
<u>Debtor</u>	Dick's Mar						
	\$1,357.44	\$1,022.03	\$786.61	\$932.10	\$341.12	\$869.57	\$884.81
<u>Spouse</u>	Mar Forw						
	\$1,703.00	\$2,021.50	\$2,561.00	\$1,976.00	\$1,872.00	\$2,080.00	\$2,035.58

Underlying AllowancesIn re: **Robert Edward Holt**
Debbie Ann HoltCase Number:
Chapter: **13**

Median Income Information	
State of Residence	Missouri
Household Size	2
Median Income per Census Bureau Data	\$51,784.00

National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous	
Region	US
Family Size	2
Gross Monthly Income	\$6,505.61
Income Level	Not Applicable
Food	\$556.00
Housekeeping Supplies	\$66.00
Apparel and Services	\$162.00
Personal Care Products and Services	\$60.00
Miscellaneous	\$209.00
Additional Allowance for Family Size Greater Than 4	\$0.00
Total	\$1,053.00

National Standards: Health Care (only applies to cases filed on or after 1/1/08)	
Household members under 65 years of age	
Allowance per member	\$60.00
Number of members	2
Subtotal	\$120.00
Household members 65 years of age or older	
Allowance per member	\$144.00
Number of members	0
Subtotal	\$0.00
Total	\$120.00

Local Standards: Housing and Utilities	
State Name	Missouri
County or City Name	Jackson County
Family Size	Family of 2
Non-Mortgage Expenses	\$517.00
Mortgage/Rent Expense Allowance	\$1,005.00
Minus Average Monthly Payment for Debts Secured by Home	\$784.22
Equals Net Mortgage/Rental Expense	\$220.78
Housing and Utilities Adjustment	\$0.00

Underlying AllowancesIn re: **Robert Edward Holt**
Debbie Ann HoltCase Number:
Chapter: **13**

Local Standards: Transportation; Vehicle Operation/Public Transportation		
Transportation Region	Midwest Region	
Number of Vehicles Operated	2 or more	
Allowance	\$424.00	
Local Standards: Transportation; Additional Public Transportation Expense		
Transportation Region	Midwest Region	
Allowance (if entitled)	\$182.00	
Amount Claimed	\$0.00	
Local Standards: Transportation; Ownership/Lease Expense		
Transportation Region	Midwest Region	
Number of Vehicles with Ownership/Lease Expense	2 or more	
	First Car	Second Car
Allowance	\$517.00	\$517.00
Minus Average Monthly Payment for Debts Secured by Vehicle	\$217.80	\$24.30
Equals Net Ownership / Lease Expense	\$299.20	\$492.70